

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Pearl City Specialized Residential Services Population	CHAPTER 98
Address: 1668 Hoohulu Street, Pearl City 96782	Inspection Date: October 7, 2019 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	NO DEFICIENCIES	NOT APPLICABLE (NA)	NA